

## Important Information for Certain Prescription Drugs

Dear Group Medicare Beneficiary:

We're writing to tell you about special requirements and limitations that apply to certain drugs. This information is being provided to assist you with getting your prescriptions filled without delay. For your convenience, we have enclosed a list of the drugs affected.

**Prior authorization.** Prior authorization means you need approval from Humana before you fill a prescription. The reason for this requirement can vary depending on the drug, but without prior approval, Humana may not cover your prescription cost. If your doctor prescribes a drug on the Prior Authorization list, be sure the doctor's office has obtained approval **before** you have the prescription filled.

The doctor can obtain approval by:

- Going online to Humana.com and selecting the provider option to make a request.
- Faxing the request to 1-877-486-2621, using the Humana fax forms (fax forms are available online at Humana.com).

The Prior Authorization turnaround time mandated by Centers for Medicare & Medicaid Services (CMS) is 72 hours. However, when the doctor requests the prior authorization, he/she can request an expedited review (24 hours) if it will harm the patient to wait 72 hours.

**Step Therapy.** Step Therapy drugs can be prescribed only after you have tried alternatives for your condition. You and your doctor will need to discuss the other options available to you. Again, the reason a drug is on the Step Therapy list can vary, but you should be sure you have fulfilled any requirements before you have a Step Therapy prescription filled.

On your effective date with Humana, if you fill or refill a prescription for one of the drugs with quantity limits, you can fill the prescription *up to* the maximum allowable quantity. However, if your doctor prescribes more than the maximum allowable quantity, you have three options:

An Insurance Company with a Medicare Advantage contract to offer a Private Fee-for-Service plan.

GNA01DHRR09PCONS

(continued on other side)

### Highlights

- ✓ All changes occur on your effective date with Humana.
- ✓ See if your medication(s) is on any of the four lists.
- ✓ If any of your medications are on a list, be sure to talk to your doctor and share the information in this letter to have your prescriptions filled without delay.

1. Use your copayment to get the quantity allowed.
2. Pay the pharmacy's retail price for the portion of your prescription that's above the allowable quantity.
3. Ask your doctor to call the Humana Clinical Pharmacy Review to discuss coverage options.

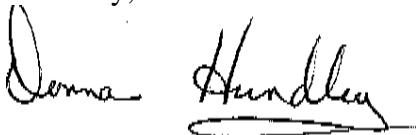
**Next steps**

1. Please review the enclosed lists to see if any of your prescriptions are included in this change.
2. Talk to your doctor if any of your prescriptions are on a list.
3. If you have questions about this information call Humana Group Medicare Customer Service at the number below.

As you may already know, there are several over-the-counter (OTC) medications available, such as allergy medications. Purchasing an OTC medication is convenient and eliminates time waiting to get your prescription filled at the pharmacy. Talk to your doctor to see if an OTC medication is right for you.

Remember, before making a change you should always discuss treatment options with your doctor. If you have questions about this information or your prescription drug benefits, please contact Humana Group Medicare Customer Service at **1-866-396-8810** (TTY: **711**). We're available seven days a week from 8:00 a.m. to 8:00 p.m. If you're asked to leave a message, we'll call you back by the end of the next business day.

Sincerely,



Donna Hundley  
Director, Group Medicare Operations

Enclosure: Prior Authorization, Step Therapy & Quantity Limit Drug Lists.

An Insurance Company with a Medicare Advantage contract to offer a Private Fee-for-Service plan.

GNA01DHRR09PCONS